

SAUSHEC Quality Improvement and Patient Safety

Graduation Requirements (Beginning AY 2013-14)

I Training prior to SAUSHEC Program Entry

Institute for Healthcare Improvement (IHI) Open School Patient Safety Modules PS 100-106 (all seven) must be completed by all INTERNS prior to starting their SAUSHEC GME training program. Instructions will be emailed to new trainees 4-5 months ahead of orientation. Completion certificates should be maintained in training folders or portfolios. IHI Open School PS modules do NOT have to be re-accomplished once done ¹

II Ongoing Education and Activities During SAUSHEC Training

Both requirements “A” and “B” must be completed prior to completion of the training program:

A. IHI Open School Quality Improvement Training Modules QI 101-105 (or equivalent training approved by the GMEC PIPS Subcommittee). Completion certificates should be maintained in the training folder or portfolio. ¹

B. Ongoing patient safety and process improvement activities: Each trainee must complete activities from this list such that the trainee will achieve a minimum number of points for the length of the program. Current trainees may be pro-rated for their point requirement.

Length of Training (years)	Required points by end of training program
1	10
2	20
3	30
4 or more	40

Record of the activity, not including HIPPA protected data, must be maintained in the training folder or portfolio. The program director is the approval authority for each contribution and is the final judge of the points earned.

- (5 PTS) Regular participation in a department Mortality and Morbidity (or equivalent) meeting as evidenced by attendance log and documentation of activity
- (5 PTS) Presentation of a case in a department Mortality and Morbidity (or equivalent) meeting with documentation of activity
- (5 PTS) Submission of a Patient Safety Report (PSR) at any program hospital and documented (brief circumstances, location, and date) in training folder or portfolio
- (10 PTS) For CURRENT RESIDENTS AND FELLOWS (PGY2 and ABOVE), until 1 July 2015. Complete all seven IHI Open School Patient Safety modules and keep documentation in training folder or portfolio.

- (10 PTS) Presentation of an article for program Journal Club, morning report, or continuity clinic on QI or PS topic as evidenced by written documentation of activity
- (10 PTS) Participation in a department or unit QI initiative or project with documentation of meeting attendance and written report of activities/contributions
- (20 PTS) Participation in a hospital (WHASC or SAMMC) Root Cause Analysis (RCA) investigation as evidenced by attendance log and documentation of contributions
- (20 PTS) Participation in GMEC Subcommittee or other hospital committee related to QI or PS evidenced by documentation of contributions
- (20 PTS) Participation in a SAMMC or WHASC Quality Improvement initiative or project (e.g. Partnership for Patients, P4P) with documentation of meeting attendance and written report of activities/contributions
- (20 PTS) Participation in a resident or fellow group FOCUS-PDSA project approved by the program director and evidenced by a written report outlining activities, role, and contributions
- (30 PTS) Leadership of a resident or fellow group FOCUS-PDSA project approved by the program director and evidenced by a written report outlining activities, leadership role/contributions ²
- (30 PTS) Completion of a personal FOCUS-PDSA project approved by the program director as evidenced by a written report of activity, oral presentation, or poster. ²
- (30 PTS) Participation in an interdepartmental or multidisciplinary FOCUS-PDSA project and evidenced by a written report of activities/contributions
- (40 PTS) Leadership of an interdepartmental or multidisciplinary FOCUS-PDSA project and evidenced by a written report of activities, leadership role/contributions ²

¹*If trainee has a certificate of equivalent training, the program director may substitute that training for this requirement and place this certificate in the training file or portfolio with a note that the PD approved this as meeting the requirement. The PD is the final arbiter of equivalency.*

²*Documented QI/PS projects may also be deemed by the PD to represent a level of effort and quality sufficient to meet the SAUSHEC graduation paper requirement. Likewise, a clinical research project with clear contributions to patient safety or quality improvement may qualify for this requirement, if approved by the program director.*

** Program Directors may award points for an activity not listed above that is related to PI/PS. This will be documented in a memorandum detailing the activity, how it improved patient safety or a specific process of patient care, the trainee's involvement, and how the points awarded were determined on a scale to the most comparable activities above.*